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## Significant Aspects of the Diet of Ten Negro Nursing and Prospective Mothers in Hempstead, Texas

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SIGNIFICANT ASPECTS OF THE DIET OF  
TEN NEGRO NURSING AND PROSPECTIVE MOTHERS IN  
HEMPSTEAD, TEXAS

By

Ollie Mayes Singleton

PRAIRIE VIEW STATE COLLEGE  
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A Thesis in Home Economics Submitted in Partial  
Fulfillment of the Requirements  
for the Degree of

Bachelor of Science

in the

Division of Home Economics

of the

Prairie View State College

Prairie View, Texas

August - 1938

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To  
My Darling Mother  
Mrs. E.E. Mayes  
and  
My Brothers  
Mr. John E. Mayes and Charlie Mayes  
whose love and encouragement  
inspired me to prepare for  
a life of efficient service  
I dedicate this thesis.

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## CONTENTS

Part I - Introduction

Page  
1

A. Explanation of terms

(1) Diet

### ACKNOWLEDGMENT

(2) Prospective mothers

(3) Nursing mothers

The writer wishes to express grateful appreciation to Mrs. M. P. Williams for her helpful suggestions made in connection with this thesis, and to the ten Negro women in Hempstead, Texas for their willing cooperation in giving the information for the basis of this thesis.

(1) Summary of findings

(2) Conclusions

Part IV - Conclusion

26

Bibliography

28



## CONTENTS

Part I - Introduction	Page 1
A. Explanation of terms	
(1) Diet	
(2) Prospective mothers	
(3) Nursing mothers	
B. Importance of the subject	
(1) Statistics	
(2) Prenatal care	
(3) Mother's health	
Part II- The Survey	5
Part III-Results of the Survey	9
(1) Summary of questions	
(2) Comments	
Part IV- Conclusion	26
Bibliography	28



PART I

"A New Deal For Mothers and Babies" should be the slogan of thinking Americans. The fact, as shown by statistics, that the death rate of mothers in the United States is higher than in most civilized countries is an indictment that reflects a defect in our social order. For birth is a social matter calling for technical experiences and skill. As a nation we cared enough to stamp out small pox, diphtheria, tuberculosis, typhoid fever and a host of other diseases. What then about maternal and infant mortality?

Before going into a formal discussion of the topic at hand, perhaps the reader would like this question answered, "What is the extent of the indictment against the American public with reference to the neglected problem of infant and maternal mortality?"

The following are comments and statistics quoted from the census of 1936 by the Forum (May 1938): -  
"More than 2,000,000 homes in the United States await the birth of a child every year and in 150,000 families the mother or baby dies. In addition an unaccounted number of women are unnecessarily injured in health or their children handicapped. There were 2,114,790 babies born in the United States in 1936. Of these 1,012,957



were born in urban, 1,131,833 in rural communities. In 1936, 12,182 mothers died in the United States as a result of pregnancy or childbirth.

Although we boast of the highest standards of living in the world and the most skillful physicians we suffer on the average fifty-seven (57) maternal deaths per 10,000 live births in our country. Sweden permits only thirty-three (33). The majority of our expectant mothers are still ignorant of the rudiments of prenatal precaution. The explanation of our backwardness about mothers lies in our inherited individualism.

The mortality rate of mothers is of course a small percentage of the casualties that attend the efforts to renew our population in the face of a diminishing birth rate. In the United States 73,735 babies were born dead and another 70,000 died in the first year of life.

More than half of these deaths were caused by diseases or conditions that might have been prevented by proper prenatal diet, exercise and cleanliness.

As a student of nutrition and foods the writer's interest is mainly with the first means of prevention, i.e., the diet. In order that the reader may grasp the meaning of the subject in the light intended by the writer, the terms of the subject will be explained.



Diet as used in this thesis refers to all the materials taken into the body to provide for tissue building and repair, to produce heat and energy, to regulate body processes and to protect against deficiency diseases.

The term prospective mother as here used, means the pregnant woman or a woman during the childbearing period extending from conception to the birth of the infant.

The nursing mother is the woman after giving birth to the child who still gives her baby breast feedings.

From statistics and comments quoted in the foregoing paragraphs the writer feels certain that the topic, "The Significant Aspects of the Diet of Ten Negro Nursing and Prospective Mothers in Hempstead, Texas", will not fail to interest and arouse any individual who is interested in race progress and perpetuation. The figures as quoted were reports for all groups and races in this vast and heterogeneous American population. But the writer feels certain that if the picture showed only the Negro group there would still be no fairer results and the percentages of maternal and infant mortality rates, as well as countless cases of suffering, might even be greater when studied alone.

Much of the suffering, untold misery and many of the deaths as well of Negro mothers never reach the cen-



sus reports of the nation. And even more grave than this is the fact that their plight seems to be overlooked generally by race promoters. That Negro mothers, the perpetrators of our race, go on year after year ignorant of proper prenatal care and believing the same superstitions is an indictment against the promoters of race betterment and a challenge to social service workers, physicians, nurses and teachers every where.

It was with this in mind that the writer made a study of ten Negro mothers, nursing and prospective, in Hempstead, Waller County, Texas.

The mothers were living in various sections of the small town. Their homes were visited several times between the first day of September, 1937 and the first day of June, 1938. At the end of the period the mothers were given a questionnaire to answer. This investigation was done solely by the writer.

Of these ten mothers it was interesting to note that three had been to college, six had finished high school and one had completed only the elementary grades. The average size of the families studied was four (4), (the parents and the children).



## PART II

### The Survey

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Hempstead is a small town in south central east Texas located about fifty miles northwest of Houston, Texas. It is one of the oldest towns in the state and is located six miles from Prairie View State Normal and Industrial College at Prairie View, Texas.

The writer selected ten Negro women who had babies or were expecting babies, living in various sections of the small town. Their homes were visited several times between the first day of September, 1937 and the first day of June, 1938. At the end of the period the mothers were given a questionnaire to answer. This investigation was done solely by the writer.

Of these ten mothers it was interesting to note that three had been to college, six had finished high school and one had completed only the elementary grades. The average size of the families studied was four (4), (the parents and two children).

10. Do you own your home? \_\_\_\_\_

11. Check all of the following which you produce at home:

milk, eggs, chickens, vegetables.

12. Name the foods, if any, which caused digestive disturbances during pregnancy. \_\_\_\_\_

13. Have you had trouble with teeth during pregnancy? \_\_\_\_\_



# Prospective and Nursing Mothers

## QUESTIONNAIRE

1. Case \_\_\_\_\_
2. Ages \_\_\_\_\_
  - ( ) Mother
  - ( ) Infant
  - ( ) Stage of pregnancy
3. Check the schools you have attended. Elementary, High School, College.
4. Have you read any literature or books on what prospective or nursing mothers should know? \_\_\_\_\_
5. Have you consulted a doctor for any reason during the period? \_\_\_\_\_
6. Who suggested your diet? Mother, friend, doctor, midwife. (Underline).
7. What is the occupation of your husband or supporter?  
\_\_\_\_\_
8. What is the monthly income of your family? \_\_\_\_\_
9. Do you live on a farm? \_\_\_\_\_
10. Do you own your home? \_\_\_\_\_
11. Check all of the following which you produce at home: milk, eggs, chickens, vegetables.
12. Name the foods, if any, which caused digestive disturbances during pregnancy. \_\_\_\_\_
13. Have you had trouble with teeth during pregnancy? \_\_\_\_\_



- Aching teeth? \_\_\_\_ Teeth pulled? \_\_\_\_ If so, how many?  
\_\_\_\_ the foods listed below that were eaten during
14. What foods did you eat during the first nine days after delivery? \_\_\_\_\_
15. What foods were you advised not to eat? \_\_\_\_\_
16. Do you or did you eat more food during pregnancy than before? \_\_\_\_ If so, state an instance of increase.
17. Did any foods which you ate make the baby ill? If so, list \_\_\_\_\_
18. Do you have plenty, average, little or no breast milk? (Underscore).
19. Does the baby take bottle feedings? \_\_\_\_\_
20. Did you have special cravings for certain foods during pregnancy? If so, what were they? \_\_\_\_\_
21. Do you believe these cravings affected the baby in any way? If so, in what way? \_\_\_\_\_
22. Have you lost pounds while nursing? \_\_\_\_ If so, how many? \_\_\_\_\_
23. Do you take medicine for laxative? \_\_\_\_ If so, what kind? \_\_\_\_\_
24. How much milk do you drink daily? \_\_\_\_\_
25. How much water do you drink daily? \_\_\_\_\_
26. Do you drink coffee or tea? \_\_\_\_\_
27. How many meals do you eat daily? \_\_\_\_\_
28. What foods other than milk, do you give your baby?  
\_\_\_\_\_



29. Do you eat green or raw vegetables every day? \_\_\_\_

\*30. Check the foods listed below that were eaten during pregnancy.

Mark \* for sometimes

Mark \*\* for often

Mark \*\*\* for very often

Mark x for never

\*The list of foods given can be found in the chart "Frequency of Food Consumption" of Part III. Results of the Survey.

1. Have you read any literature or books on what nursing and prospective mothers ought to know?

A - yes 3  
no 1

2. Have you consulted a doctor for any reason during the period?

A - yes 4  
no 6

3. Who suggested your diet?

A - Mother (1)  
Doctor (1)  
Friend (3)  
Midwife (5)

4. What is the occupation of your husband or support-  
er?

A - Unemployed 2  
Day Labor 4  
Farmer 4

\*A will be used for answers.



## PART III

## Results of the Survey

In order that the reader may get a complete picture of the mothers' answers the writer will re-state the questions and tabulate the answers for each. In questions calling for an answer of yes or no the numbers answering yes were recorded and the number answering no was recorded. In questions requiring lists all the different foods listed by each mother were included.

1. Have you read any literature or books on what nursing and prospective mothers ought to know?

\*A - yes 9  
no 1

2. Have you consulted a doctor for any reason during the period?

A - yes 4  
no 6

3. Who suggested your diet?

A - Mother (1)  
Doctor (1)  
Friend (3)  
Midwife (5)

4. What is the occupation of your husband or supporter?

A - Unemployed 2  
Day Labor 4  
Farmer 4

\*A will be used for answers.



5. Check all the following which you produce at home.

A - milk (1)  
 chickens (8)  
 eggs (8)  
 vegetables (4)

6. Name some of the foods which cause digestive disturbances during pregnancy? Some foods listed were:

potatoes  
 bananas  
 meats pork

7. Have you had trouble with teeth during pregnancy?

A - aching teeth - 3  
 teeth pulled - 0

8. What foods did you eat during the first nine days after delivery?

A - Those foods listed were:

chicken	corn bread	prunes
ham	toast	oatmeal
rice	butter	bacon
grits	cake	

9. What foods were you advised not to eat?

A -

milk	onions	fish
oysters	meat	pork
tomatoes	ice cream	vegetables
fresh potatoes	cabbage	squirrels

10. Do you or did you eat more foods during pregnancy than at other times?

A - yes 2  
 no 8

11. Have you lost pounds while nursing?

A - yes 6  
 no 4



12. Do you take medicine for laxative? daily?

A - yes 8  
no 2

13. If so, what kind? the following list, (See Pre-

A - Those named were: (See Chart) that were eaten

1. Black draught
2. Castor oil
3. Syrup Spectie

14. How much milk do you drink daily? placed indicates

A - 2 qts - 0  
1 qt - 2  
1 pt - 2  
 $\frac{1}{2}$  pt - 4  
0 - - 2

15. How much water do you drink daily?

A - 4 glasses (or more) 2  
3 glasses 2  
2 glasses 4  
1 glass 2

16. Do you drink coffee or tea?

A - Tea 0  
Coffee 4

17. How many meals or times do you eat daily?

A - 4 meals 1  
3 meals 4  
2 meals 5

18. What foods, other than milk, do you give your baby?

A - Those foods listed were:

Oatmeal	rice
Cream of wheat	Eggs
Soups	Spinach
Prune juice	Carrots
English peas	White potatoes
Mustard greens	



19. Do you eat green or raw vegetables daily?

A - yes      3  
           no      7

20. Check the foods in the following list, (See Frequency of Food Consumption Chart) that were eaten during pregnancy or the lactation period. The numbers indicate how many mothers ate the particular food and the column in which it is placed indicates how frequently it was eaten.

Cucumbers	3	1	7	1	1
Squash					
Tomatoes	2	1	8	1	1
Apples		1	2	4	4
Dried Apples	2	1	4	4	1
Prunes	1	1	4	5	1
Peaches	1	1	3	7	1
C. Peaches	1	1	3	7	1
Bananas	1	1	2	8	1
Blackberries			8	2	1
Strawberries	2	1	4	4	1
Grape Fruit	4	1	4	2	1
Oranges		1	2	3	1
Lemons		1	8	2	1
Apricots	4	1	4	2	1
Plums	1	1	0	1	1



## FREQUENCY OF FOOD CONSUMPTION

## CHART

Food	Never	Sometimes	Often	Very Often
Cornflakes		5	5	
Wheat				
Oatmeal	1	3	6	
Cucumbers	5	5		
Squash	6	4		
Cushaw	3	7		
Tomatoes	2	8		
Apples		2	4	4
Dried Apples	2	4	4	
Prunes	1	4	5	
Peaches	1	3	7	
C. Peaches	1	3	7	
Bananas	1	2	8	
Black-berries		8	2	
Straw-berries	2	4	4	
Grape fruit	4	4	2	
Oranges		2	8	
Lemons		8	2	
Apricots	4	4	2	
Plums	1	9		



Food	Never	Sometimes	Often	Very Often
Milk	3	1	3	3
Eggs		1	4	5
Cheese	2	4	3	1
Ham	1	4	5	
Beef	1	3	2	4
Gelatin	9	1		
Bacon		1	8	1
Pork	1	4		5
Cod Liver Oil	10			
Butter		1	4	5
Cream		6	4	
Chicken	2	6	2	
Liver	1	3	6	
Kidney	6	2	2	
Heart	2	3	4	1
Nuts			2	8
Navy Beans		3	2	
English Peas	7	3		
Cream Peas	1	1		8
Blackeyed Peas	7	3		
Oysters	4	4	2	
Spinach	8	2		



Food	Never	Sometimes	Often	Very Often
Mustard Greens	1	1	8	
Collard	1	9		
Turnip	1	3	7	
Lettuce	5	4	1	
Celery		5	4	2
Cabbage	3	2	5	
Swiss Chard	9	1		
Okra	1	1	8	
Kale	9	1		
Sweet Potatoes			10	
Irish Potatoes		3	7	
Snap Beans	4		2	4
Cake		1	7	2
Cornbread		1	2	7
Biscuits			1	9
Hominy Grits	1	1	8	
Honey	9	1		
Macaroni		1	4	5

phases of the diets of these ten Negro nursing and prospective mothers of Hempstead, Texas, as well as those of countless thousands of Negro mothers not surveyed, that are faulty and need correction. They are as



## PART IV

Comments and Observations

What are the significant aspects of the diet of these ten Negro mothers of Hempstead, Texas? What is favorable about their diet? What is faulty?

As a student of nutrition the writer could point out readily, perhaps, the reader could also, a few major faults found in the diets of these ten mothers. But due to the rather limited amount of information on the subject the writer feels that the total criticism of the diet for the reproductive period should be from personalities who have given years of their lives to study, experimentation and observation in this particular field. Therefore, the writer shall comment on the diets of these nursing and prospective mothers in the words of such experienced pediatricians, obstetricians, physicians and specialists in nutrition as Dr. J. H. Kenyon, Fairfax T. Proudfit, Margaret Stella Chaney, L. Jean Bogert, James S. McLester and Mary Swartz Rose.

From the results of the investigation, as shown by the answers given by the mothers, there are nine distinct phases of the diets of these ten Negro nursing and prospective mothers of Hempstead, Texas, as well as those of countless thousands of Negro mothers not surveyed, that are faulty and need correction. They are as



follows: (1) The source of information about the diet; (2) Digestive disturbances; (3) Trouble with teeth; (4) Increase in the consumption of food during the reproductive period; (5) Loss of weight during the period of lactation; (6) Constipation; (7) Consumption of milk; (8) Water, and (9) Mineral and vitamin content of the diet. The writer shall comment on and state the opinion of various authorities about each of the foregoing problems with the hope that the reader or someone whom the reader knows will be helped by the information.

The source of information about the diet should be more authentic. If the reader will note, it is clearly indicated that 50% of the mothers received their information about diet from midwives and 97% from sources other than the family doctor or nurse. Midwives are usually elderly women who know too little about nutrition to be considered authentic in the matter of proper diet. Every mother or expectant mother owes it to her child to know as much about the proper kinds of foods to be eaten as she possibly can.

The family physician or nurse is the most reliable source from which to secure information. He should be consulted at least twice during pregnancy. (Once during the first stage and once during the last stage). The doctor will make test of the blood and urine and can tell scientifically what foods the mother needs for



her protection as well as for her baby's.

With reference to the importance of diet Dr. Kenyon\* makes this statement:

"Whether or not you feel like eating or regardless of your food preferences, it is up to you to eat the kind of food which will nourish your baby. He has no other source of supply. The complicated structure of his body is by the building materials supplied from the mother's blood during pregnancy."

"Her blood does not circulate through the baby's body but by means of a kind of filtering process in the placenta the required food is taken up by the child's circulation and absorbed by the tissues of his body. It is essential that during pregnancy and nursing period she choose the food substances which will promote her child's growth and not be governed solely by her own likes and dislikes."

Several of the mothers were troubled with digestive disturbances and nausea. With reference to nausea Chaney and Ahlborn make the following statement:

"The nausea or morning sickness common during the first three or four months of pregnancy may be of nervous origin or may be caused by indiscretion in diet, hurried eating, worry, grief or emotion. It is considered by some to be a mild toxemia caused by placental

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\*Dr. Josephine H. Kenyon - "Healthy Babies Are Happy Babies" - p. 14.



protein intoxication. When this condition persists, it is called pernicious vomiting; this is more serious than the temporary form, since it is only distressing but will deprive the woman of essential nourishment at this time of great need."

About this same condition L. Jean Bogert makes the following comment:

"A great many women are apt to experience nausea and digestive disturbances in the early part of pregnancy, so that special care should be taken to avoid over taxing the digestive tract with unneeded food or foods difficult to digest, as well as guard against such factors as fatigue, excitement, worry, and constipation which have an unfavorable influence upon digestion. Hence, the diet should be limited to moderate amounts of simple easily digested foods, which may often be better utilized if taken in small amounts at more frequent intervals. A few crackers, a cup of rather strong tea or black coffee taken before getting up in the morning may relieve the nausea apt to occur at this time. Simple lunches (such as crackers, gruel, milk drinks, or fruit juice) taken in the middle of the morning or afternoon or before retiring may also help."

"This condition of nausea is due not to any difficulty in the alimentary tract itself but to readjust-



ments necessary in establishing the connection between the maternal and fetal circulations through the placenta. As soon as this connection is well established the nausea should disappear and the mother's appetite and digestion should improve."

It was found that several of the mothers had trouble with teeth during pregnancy. Many mothers believe that the loss of a tooth for each child is natural. But with reference to this Chaney and Ahlborn state:

"The common statement that every baby costs a tooth is not literally true; since the mother, however, tends to be a factor of safety for her unborn child, she will if her diet is not adequate in minerals, furnish them from her own body and the drain from her teeth will be the first visible evidence of this inadequacy. Mothers suffer less at the present time, because of education concerning the need of an early visit to the dentist."

Pregnancy is a period of growth and the diet must be relatively rich in growth promoting substances. There need be, however, no marked increase in the total energy value of the diet. Quantitatively the demands on the mother grow day by day.\* Oft times mothers lose weight during the lactation period or fail to produce milk to the fullest capacity because of insufficient food. It would seem reasonable to allow the mother in

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\*Mary Swartz Rose - "Foundations of Nutrition"



the mother in the first three months, as additional fuel for milk supply, 60 calories per day for each pound of the babies weight and 40 calories per pound for the last three months. To furnish the protein needed there should be added to the mother's diet at least two protein calories per pound.

From the foregoing statement by Mary Swartz Rose, one can readily see that there is a necessity for an increase in the kind and quantity of food during the reproductive period.

During pregnancy the mother must eliminate the waste products for the unborn child as well as those from her own body. It is important that this be facilitated by a relatively large proportion of liquids. At least two quarts of fluid should be taken daily. One quart should be milk. A considerable part may be fruit juices or broths made from vegetable dishes. Meats should be used sparingly so that the total protein intake may not exceed 10% of the total calories, lest the kidneys be overtaxed.

The diet will also need be more laxative than usual. Liberal amounts of fresh fruits and leafy vegetables with whole wheat bread, bran breakfast food are most desirable at this time. Not only for laxative effects but for mineral salts as well should these foods be used. Care should be taken in their selection to secure liberal amounts of Vitamins A, B, C, and G.



It is to be noted that 80% of the mothers studied were suffering from constipation and were using laxatives. With reference to constipation and the use of laxatives, Dr. Kenyon makes these statements:

"Tea and coffee are sometimes constipating. In this case try omitting them. Unsweetened prune juice or grape juice taken upon retiring or upon rising often acts as a laxative. Eat less meat and more laxative fruits such as prunes, apples and figs. Do not take cathartics unless your doctor definitely advises them. Certain cathartics are to be avoided during pregnancy, such as castor oil, pills containing aloes, or any strenuous purgative. Instead try mineral oil, agar-agar, or some other non-food mechanical softener.

"Constipation in the early months and toward the end of pregnancy may be due to pressure of the enlarged uterus against the rectum and so may not respond to ordinary treatment. When simple changes in food, position and regularity of habit are of no avail take an enema as an emergency but report the necessity for this to your doctor."

It is also to be noted that most of the mothers did not drink enough milk and in some instances none whatever. Milk, as authorities agree, is our most perfect food and at this period the mother will do well to drink plenty of milk, whether she likes it or not.



With reference to milk in the diet during the reproductive period Chaney and Ahlborn make this statement:

"Try to consume one quart of milk daily. You may cook with it, mix it with soups or gruels and drink it. If you have a peculiar sensitivity to milk let your doctor know about it so he may advise some form of calcium to make up for the lack in your diet."

Early in pregnancy ossification of fetal bone centers take place and by the fourth month most of the bones are undergoing calcium and phosphorus deposition and the teeth are forming. By the end of the prenatal period the temporary teeth are well formed in the jaw and even the calcification of the first permanent molars has begun. Since skeletal growth is of vital concern at this stage the bone building foods should be supplied in liberal amounts. According to the work of Booker and Hansmann, the calcification of the bone of the newborn rat is constant despite the variations in the nutritional history of the mother. This indicates that the mother is a factor of safety for the young whether or not she can maintain her own calcium balance.

The iron requirement during pregnancy is likewise great, since the building material is in demand by the fetal organism. According to Sherman there should be a daily increase of 3 (three) milligrams of iron to care for the greater requirement of the mother and child.



Meat, eggs, vegetables and whole grains which are noted to be good sources of iron should be included in the diet.\*

In certain regions there is a possibility of insufficient iodine for the best functioning of the thyroid gland. The regular use of iodized table or a suitable preparation of iodine prescribed by a physician is desirable to forestall the possibility of development of simple goiter in the mother and for the welfare of the child.\*

✓ Shortage of any one of the vitamins has been shown to have disastrous effects upon reproduction. The body does not carry reserves of Vitamins B, C, G and D and must have new supplies constantly. While it does have the power of storing vitamin A, often this has not been taken by the mother through her own developing years in sufficient amounts to allow much storage and in any case the demands of the unborn child for this vitamin are very great. Hence vitamin A should always be well represented in the diet. The teeth of a child are largely determined before birth and the storage of ash constituents and of all vitamins, especially, vitamin C and D affect them unfavorably. No mother should feel that she has done her full duty to her child unless she pays special attention to getting a rich source of Vitamin D.

\*1Chaney and Ahlborn - Nutrition

\*2Rose, Feeding the Family



From the above statements by Mary Swartz Rose and Margaret Chaney, one can readily see the importance of a diet which includes an optimal quantity and quality of mineral and vitamin.

A reference to the Chart "Frequency of Consumption of Foods" will show that the diets of ten mothers studied are in some instances on the border line of danger as to the matter of mineral and vitamin content. With reference to the inclusion of ash and vitamins in the diet Dr Kenyon makes the following statements:

"A simple diet to keep your health and give you the necessary vitamins and mineral salts is made up of foods chosen daily from each of the following seven groups:

1. Milk, cottage cheese, buttermilk, acidophilus milk and butter.
2. Eggs, especially yolks, yellow vegetables, calf, chicken, beef or pig liver.
3. Whole grain cereals.
4. Two or three leafy vegetables cooked or raw.
5. Fruits - especially oranges, apples, pears, peaches, apricots, prunes, figs, dates, raisins, pine-apples, tomatoes, raw or canned.
6. Salt water fish, canned salmon, oysters or clam.
7. Cod liver oil or vitamin D concentrate.



## PART V

## Conclusion

It is the hope of the writer that the reader has been lead to see some of the problems of nursing and prospective mothers and how these problems can be solved. From this study of the diet of Negro nursing and prospective mothers the writer makes the following conclusions to be left in the mind of the reader:

(1) Mothers, in general and especially Negro mothers, should learn the essentials of optimal nutrition for the period of pregnancy. They should be encouraged to practice such measures as will enhance the opportunity for optimal growth and development of their offspring. Prospective and nursing mothers should regard this matter as a debt to society in the interest of race betterment.

(2) Optimal nutrition, facilitated by a calm quiet life reasonably free from grief, fear, worry, anxiety and excitement should be every nursing and prospective mothers' goal when this thought of Chaney is kept in mind:

"At no other time is a diet supplied with proteins adequate for growth, ash constituents of all kinds (especially calcium, phosphorus and iron) and of all known vitamins going to bring as big a return as when



eaten by a mother upon whom an unborn child is depending for its sustenance and the best equipment mentally, physically and emotionally, that heritage can give.

(3) Midwives, who are still our best and in most cases our only medium for the giving of information concerning the diet of nursing and prospective mothers, should be required to learn more about nutrition.

✓ (4) Fourth and last, teachers, physicians, nurses and all social workers should take it as a part of their duty to the cause of race betterment to attempt to disseminate information about nutrition of the reproductive period and try to effect a program which will foster the realization of the slogan "A New Deal for Mothers and Babies."

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*Feeding the Family - Macmillan Co, 1932*



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